## **BEST AVAILABLE COPY**

PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000												
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OR	OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS			19					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		ВА	ASIC FEE	35 <u>5</u> .00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			<i>19</i> minus 20=		· Ø			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		* 0			X40=		OR	X80=	2 .
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				<b> </b>	+135=			+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2							L	OTAL		OR OR	TOTAL	710
			IOIAL		OH	OTHER						
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)								SMALL E	ENTITY	OR	SMALL	
AMENDMENT A	s surre parallel	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIC PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							⊦135=		OR	+270=	
en e								TOTAL			TOTAL	
	(Column 1) 12 64 5 (Column 2) (Column 3)							DIT. FEE			ADDIT. FEE	
NDMENT B		CLAIMS REMAINING AFTER		HIGH NUM PREVIO PAID	HEST IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	TOR	=		X\$ 9=	1 44	OR	X\$18=	
AMEN	Independent	*	Minus	***		=	1 ├-	X40=			X80=	
₹	FIRST PRESENTATION OF MULTIPLE DEPEND				CLAIM		▎├			OR		
							Ľ	+135= TOTAL		OR	+270= TOTAL	
								TOTAL DIT. FEE		OR	ADDIT. FEE	·
		(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST										
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	] ] :	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	-	X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA						┙┝	+135=		l	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
**	If the "Highest Nu If the "Highest Nu	ımber Previously P umber Previously F mber Previously Pa	aid For" IN THI Paid For" IN TH	S SPACE IS SPACE	is less that	an 20, enter "20 an 3, enter "3."	7.0	DIT. FEE	propriate bo	OR x in co	ADDIT. FEE	L

Application or Docket Number